

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			2/7/01
FORMALITY REVIEW	EW	949	2/22/01
RESPONSE FORMALITY REVIEW	Zm	927	06/07/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3/12/01
2	23/01/01
3	6/2/01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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